	19-6	81155-BPH Do	oc#: 15 Filed: 11/18	8/19 Entered: 11/18/	/19 10:51:08	Page 1	of 53
Fill	in this infor	mation to identify you	r case:				
Del	otor 1	BLAKE THOMA	S VETTER				
Del	otor 2	First Name	Middle Name	Last Name			
1	ouse if, filing)	First Name	Middle Name	Last Name			
Uni	ted States Ba	ankruptcy Court for the:	DISTRICT OF MONTANA	1			
Cas	se number	19-61155					
(if kr	nown)					_	cif this is an ded filing
	ficial Ec	orm 106Sum					ŭ
			and I jabilities and	d Certain Statistical	Information		12/15
Be a	as complete rmation. Fill r original for	and accurate as poss out all of your schedu	ible. If two married people a lles first; then complete the	ire filing together, both are eq information on this form. If y the box at the top of this page	ually responsible ou are filing amen	for supplyir	ng correct
						Your a	ssets
						Value o	of what you own
1.	Schedule A 1a. Copy lin	A/B: Property (Official ne 55, Total real estate,	Form 106A/B) from Schedule A/B			\$	248,000.00
	1b. Copy lir	ne 62, Total personal pr	operty, from Schedule A/B			\$	7,929.31
	1c. Copy lir	ne 63, Total of all prope	rty on Schedule A/B			\$	255,929.31
Par	t 2: Sumn	narize Your Liabilities					
							abilities t you owe
2.			Claims Secured by Property (0 umn A, Amount of claim, at th	Official Form 106D) e bottom of the last page of Pa	rt 1 of Schedule D	\$	195,485.00
3.			e Unsecured Claims (Official F t 1 (priority unsecured claims)	Form 106E/F)) from line 6e of <i>Schedule E/F</i>		\$	17,245.00
	3b. Copy tl	ne total claims from Par	t 2 (nonpriority unsecured cla	ims) from line 6j of Schedule E	/F	\$	124,279.80
				,	Your total liabilitie	\$	337,009.80
Par	t 3: Sumn	narize Your Income an	d Expenses				
4.		Your Income (Official Foundation of Your Income (Official Foundation)				\$	2,440.31
5.		: Your Expenses (Offici monthly expenses from				\$	2,527.00
Par	t 4: Answ	er These Questions fo	or Administrative and Statist	tical Records			

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 BLAKE THOMAS VETTER

Case number (if known) 19-61155

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$			_

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	17,245.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	17,245.00

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									, -	
Fill	n this info	rmation to	identify	your case and th	nis filinç	g:				
Deb	tor 1	BLAI	KE THO	MAS VETTER						
Dah	tor O	First Na	ame	Middle	e Name	Last Name				
Deb (Spot	tOr ∠ se, if filing)	First Na	ame	Middle	e Name	Last Name				
Unit	ed States E	Bankruptcy	Court for	the: DISTRICT	OF MO	NTANA				
Cas	e number	19-6115	5							Check if this is an
Ouc		13-0113	J						_	amended filing
Off	icial F	orm 10)6A/E	3						
Sc	hedu	le A/F	B: P	roperty						12/15
					an asset	only once. If an asset fits in more than one	category, li	st the asset in	the	
hink	it fits best.	Be as comp	olete and	accurate as possib	le. If two	married people are filing together, both are his form. On the top of any additional pages	equally resp	onsible for su	ıpply	ing correct
	er every que		, necucu,	attacii a separate s		ins form. On the top of any additional pages	, write your	iame and cas	c mai	ilber (il kilowil).
Part	1: Describ	e Each Resi	idence, B	uilding, Land, or Ot	her Real	Estate You Own or Have an Interest In				
. Da	VOU OWD O	r have any l	0001 01 00	vuitable interest in s	ny roois	lence, building, land, or similar property?				
i. DC	you own o	i ilave ally i	egai oi et	quitable interest in a	iny resid	ence, bunding, land, or similar property?				
	No. Go to P	art 2.								
	Yes. Where	e is the prope	erty?							
1.1	1025 247	TH AVE. S	•		What	t is the property? Check all that apply				
		s, if available,		scription		ů ,				or exemptions. Put ims on Schedule D:
				·		Duplex or multi-unit building Condominium or cooperative	Creditors \	Vho Have Claii	ms S	ecured by Property.
					ш	·				
						Manufactured or mobile home	Current va	lue of the	Cı	urrent value of the
	GREAT	FALLS	MT	59405-0000		Land	entire pro	perty?		ortion you own?
	City		State	ZIP Code		Investment property Timeshare	\$	48,000.00	_	\$48,000.00
						Other				ownership interest by the entireties, or
					Who	has an interest in the property? Check one		ee simple, ten e), if known.	апсу	by the entireties, or
						Debtor 1 only				
	CASCAE	DE				Debtor 2 only				
	County					Debtor 1 and Debtor 2 only	☐ Chec	k if this is com	nmur	nity property
						The reads one of the debtere and another	,	structions)		,, ,
						r information you wish to add about this ite erty identification number:	n, such as lo	ocal		
						8 NEWMOON TRAILER				
						RIAL NUMBER: 219385				
					TITI	_E NUMBER: M137424				
						OSPECT PARK, FINLEY SUPPLEM	ENT, BLO	CK 28, LO1	ΓS 1	1 AND 12,
					CAS	SCADE COUNTY, MONTANA				

Official Form 106A/B Schedule A/B: Property page 1

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tor 1 BLAKE TH	IOMAS \	/ETTER	Case	e number (if known) 19-6	31133
If you own or have	ve more	than one, list h			
1601 5TH AVE. N Street address, if available		scription	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D
GREAT FALLS City	MT State	59401-0000 ZIP Code	☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare ☐ Other ☐ Who has an interest in the property? Check one ☐ Debtor 1 only	Current value of the entire property? \$100,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	
County			☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this ite	Check if this is come (see instructions)	nmunity property
			property identification number:		
If you own or have 601 5TH AVE. S. Street address, if available				Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on <i>Schedule</i> i
601 5TH AVE. S. Street address, if available GREAT FALLS	, or other des	scription 59405-0000	ere: What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule I ms Secured by Propert Current value of th portion you own?
601 5TH AVE. S. Street address, if available	, or other des	scription	ere: What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secure Creditors Who Have Clair Current value of the	cour ownership interes

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 2

_	٧o				
•	⁄es				
3.1	Make:	FORD	Who has an interest in the property? Check one	Do not deduct secured cl	
J. 1	Model:	F150 TRUCK	_	the amount of any secure Creditors Who Have Clair	
	Year:	1999	■ Debtor 1 only □ Debtor 2 only		
		nate mileage: 250,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		formation:	☐ At least one of the debtors and another	oo proporty :	pornon you on
			☐ Check if this is community property (see instructions)	\$1,063.00	\$1,063.00
.2	Make:	GMC	Who has an interest in the property? Check one	Do not deduct secured cl	
	Model:	XXX TRUCK	■ Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	1988	Debtor 2 only	Current value of the	Current value of the
	Approxin	nate mileage: 140,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	☐ At least one of the debtors and another		
		S BRAKES AND NEW	<u>_</u>	\$200.00	¢200.00
	BATTE CHECK	ERY K ENGINE LIGHT IS ON	☐ Check if this is community property (see instructions)	φ200.00	\$200.00
3.3	Make:	YAMAHA	Who has an interest in the property? Check one	Do not deduct secured cl	
	Model:	XVZ13A	■ Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	1996	Debtor 2 only	Current value of the	Current value of the
	Approxin	nate mileage: 100,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	formation:	☐ At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$2,270.00	\$2,270.00
Exa □ I ■ `	mples: B			d accessories accessories Do not deduct secured cl	aims or exemptions. Put
Exa	<i>mples:</i> B No Yes	oats, trailers, motors, personal wa	d other recreational vehicles, other vehicles, an tercraft, fishing vessels, snowmobiles, motorcycle a	d accessories accessories	laims or exemptions. Put ed claims on Schedule D:
Exa □ I ■ `	mples: B No Yes Make:	oats, trailers, motors, personal wa	(see instructions) d other recreational vehicles, other vehicles, an tercraft, fishing vessels, snowmobiles, motorcycle at the work of th	d accessories accessories Do not deduct secured of the amount of any secure	aims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
Exa □ I ■ `	mples: B No 'es Make: Model:	oats, trailers, motors, personal wa	(see instructions) d other recreational vehicles, other vehicles, an tercraft, fishing vessels, snowmobiles, motorcycle at the whole of the work of t	Do not deduct secured of the amount of any secure Creditors Who Have Clair	laims or exemptions. Put ed claims on Schedule D:
Exa	mples: B No /es Make: Model: Year:	oats, trailers, motors, personal wa	who has an interest in the property? Check one Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put ed claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own?
Exa □ I ■ `	mples: B No /es Make: Model: Year:	LAR BOAT 1972	(see instructions) d other recreational vehicles, other vehicles, an tercraft, fishing vessels, snowmobiles, motorcycle at the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	aims or exemptions. Put be claims on Schedule Disims Secured by Property. Current value of the
Exe	mples: B No /es Make: Model: Year:	LAR BOAT 1972	who has an interest in the property? Check one Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property	Do not deduct secured classes accessories Do not deduct secured classes who Have Classes Who Have Classes Current value of the entire property? \$250.00	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$250.00
Exe	mples: B No Yes Make: Model: Year: Other inf	LAR BOAT 1972 Tormation:	who has an interest in the property? Check one Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$250.00
Exe	mples: B No Yes Make: Model: Year: Other inf	LAR BOAT 1972 formation:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one	Do not deduct secured classes accessories Do not deduct secured classes who have Classes Who Have Classes Current value of the entire property? \$250.00 Do not deduct secured classes who have classes the entire property?	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$250.00
Exe	mples: B No Yes Make: Model: Year: Other inf Make: Model: Year:	LAR BOAT 1972 formation: CALK TRAILER 1975	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$250.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$250.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
Exe	mples: B No Yes Make: Model: Year: Other inf Make: Model: Year:	LAR BOAT 1972 CALK TRAILER	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$250.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the amount of any secure Creditors Who Have Clair Current value of the entire property?	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$250.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Exa	mples: B No Yes Make: Model: Year: Other inf Make: Model: Year:	LAR BOAT 1972 formation: CALK TRAILER 1975	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$250.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the amount of any secure Creditors Who Have Clair Current value of the	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$250.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the

Official Form 106A/B

Debtor 1 **BLAKE THOMAS VETTER** Case number (if known) 19-61155 Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... **COUCH 200.00 RECLINER 100.00 DESK 10.00 END TABLES 10.00 COFFEE TABLE 5.00 CLOCK 2.00** DRESSER 10.00 **BED 50.00 KITCHEN TABLE & CHAIRS 30.00 POTS & PANS 30.00 DISHES & UTENSILS 20.00 REFRIGERATOR 100.00 DISHWASHER 15.00** \$587.00 **MICROWAVE 5.00 WASHER 100.00 DRYER 100.00 BARBEQUE 15.00 PATIO FURNISHINGS 25.00 LAWN MOWER 15.00 TOOLS 50.00** \$505.00 WATER TANK 200.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... **40" TELEVISION 50.00 STEREO 20.00 RECORDS 20.00 CASSETTE TAPES 5.00** VCR 10.00 **DVD PLAYER 10.00 DVD'S 5.00 VIDEO GAMING EQUIPMENT 200.00 VIDEO GAMES 60.00 COMPUTER 150.00** \$560.00 **PRINTER 30.00** 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

□ No

Yes. Describe.....

CHINA/CRYSTAL 50.00 **NICK-KNACKS 50.00**

\$100.00

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1 Case number (if known) 19-61155 **BLAKE THOMAS VETTER** 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments □ No Yes. Describe..... **GOLF EQUIPMENT 20.00 CAMPING EQUIPMENT 20.00 FISHING EQUIPMENT 50.00** \$110.00 **EXERCISE EQUIPMENT 20.00** 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$100.00 **MEN'S WEARING APPAREL** 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,962.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **CASH** \$43.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes.....

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Official Form 106A/B Schedule A/B: Property page 5

De	btor 1	BLAKE THOMAS VETTER			Case number (if known) 19-61155				
			17.1.	CHECKING	MONTANA FEDERAL CREDIT UNION	\$7.15			
			17.2.	SAVINGS	MONTANA FEDERAL CREDIT UNION	\$48.86			
			17.3.	BUSINESS CHECKING	STOCKMAN BANK	\$233.64			
			17.4.	PERSONAL CHECKING	STOCKMAN BANK OF MONTANA	\$651.66			
	Examp	mutual funds, or ples: Bond funds, inv			erage firms, money market accounts				
	■ No □ Yes			Institution or issuer na	me:				
19.	Non-pu joint ve		and	interests in incorpora	ated and unincorporated businesses, including an interest	in an LLC, partnership, and			
	■ No □ Yes.	Give specific inform		about them me of entity:	 % of ownership:				
_	Negotia	able instruments inc	lude p	personal checks, cashi	able and non-negotiable instruments ers' checks, promissory notes, and money orders. Efer to someone by signing or delivering them.				
I	☐ Yes. 0	Give specific informa		about them uer name:					
		nent or pension acc les: Interests in IRA			B(b), thrift savings accounts, or other pension or profit-sharing pl	lans			
_		ist each account se		tely. of account:	Institution name:				
_	Your sh		eposit	ts you have made so th	nat you may continue service or use from a company blic utilities (electric, gas, water), telecommunications companie	es, or others			
	■ No □ Yes				Institution name or individual:				
	_	es (A contract for a	perio	dic payment of money	to you, either for life or for a number of years)				
	■ No □ Yes	lssue	r nam	e and description.					
	26 U.S.C	s in an education I C. §§ 530(b)(1), 529			lified ABLE program, or under a qualified state tuition prog	ıram.			
_	■ No □ Yes	Institu	ution r	name and description.	Separately file the records of any interests.11 U.S.C. § 521(c):				
	Trusts, ■ No	equitable or future	inte	rests in property (oth	er than anything listed in line 1), and rights or powers exer	cisable for your benefit			
		Give specific inform	ation	about them					
					other intellectual property from royalties and licensing agreements				

Official Form 106A/B Schedule A/B: Property page 6

 $\hfill \square$ Yes. Give specific information about them...

19-61155-BPH Doc#: 15 Filed: 11/18/19 Entered: 11/18/19 10:51:08 Page 9 of 53 Debtor 1 **BLAKE THOMAS VETTER** Case number (if known) 19-61155 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... **FEDERAL AND** 2019 Unknown STATE 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information..... \$380.00 PER MONTH CHILD SUPPORT \$380.00 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here......

\$1,364.31

Schedule A/B: Property

☐ Yes. Give specific information..

Official Form 106A/B

Debtor 1	BLAKE THOMAS VETTER	Case number (if known) 1	9-61155
Part 5: Do	escribe Any Business-Related Property You Own or Have an Interest In. List an	y real estate in Part 1.	
-	own or have any legal or equitable interest in any business-related property? So to Part 6.		
Yes.	Go to line 38.		
			Current value of the
			portion you own? Do not deduct secured claims or exemptions.
39 Accou	unts receivable or commissions you already earned		
■ No	unts receivable of commissions you already earned		
	. Describe		
Exam	e equipment, furnishings, and supplies nples: Business-related computers, software, modems, printers, copiers, fa	x machines, rugs, telephones, desks, ch	airs, electronic devices
■ No	Describe		
⊔ Yes	. Describe		
40. Machi □ No	inery, fixtures, equipment, supplies you use in business, and tools of	your trade	
	. Describe		
	TOOLS OF THE TRADE:		
	LADDER 50.00		
	STEP LADDER 30.00 DRAIN SNAKE 40.00		
	CORDLESS DRILL 20.00		
	CORDLESS SAWZALL 20.00		
	POWER SAW 15.00 PLUMBINGTOOLS 50.00		
	ELECTRIC TOOLS 30.00		
	TOOLBOX 50.00		
	LAWN MOWER 15.00 CARPET SHAMPOOER 50.00		
	MISC. HAND TOOLS 300.00		\$670.00
41. Invent	tory		
■ No	Describe		
⊔ Yes	. Describe		
42. Intere	ests in partnerships or joint ventures		
■ No			
☐ Yes	Give specific information about them Name of entity:	% of ownership:	
43. Custo ■ No.	omer lists, mailing lists, or other compilations		
	our lists include personally identifiable information (as defined in 11 U.S.C. § 101	1(41A))?	
_ 50)0		······//·	
	■ No		
	Yes. Describe		
44 Any h	ousiness-related property you did not already list		
■ No	rushicos related property you did not already list		

Official Form 106A/B Schedule A/B: Property page 8

Deb	otor 1 BLAKE THOMAS VETTER		Case number (if known)	19-61155
	Yes. Give specific information			
	Add the dollar value of all of your entries from Part 5, including for Part 5. Write that number here			\$670.00
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You Of If you own or have an interest in farmland, list it in Part 1.	own or Have an Interes	t In.	
46.	Do you own or have any legal or equitable interest in any farm- o ■ No. Go to Part 7. □ Yes. Go to line 47.	r commercial fishin	g-related property?	
Part	7: Describe All Property You Own or Have an Interest in That You I	Did Not List Above		
	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$248,000.00
56.	Part 2: Total vehicles, line 5	\$3,933.00		
57.	Part 3: Total personal and household items, line 15	\$1,962.00		
58.	Part 4: Total financial assets, line 36	\$1,364.31		
59.	Part 5: Total business-related property, line 45	\$670.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$7,929.31	Copy personal property to	otal \$7,929.31
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$255,929.31

Official Form 106A/B Schedule A/B: Property page 9

Fill in this inform	nation to identify your	case:		
Debtor 1	BLAKE THOMAS	VETTER		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF MONTANA		
Case number 1	9-61155			
(if known)				☐ Check if this is ar amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt							
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	☐ You are claiming federal exemptions. 11 t								
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	1925 24TH AVE. S. GREAT FALLS, MT 59405 CASCADE County	\$48,000.00	•	\$250,000.00	Mont. Code Ann. §§ 70-32-104, 25-13-615				
	1968 NEWMOON TRAILER SERIAL NUMBER: 219385		П	100% of fair market value, up to any applicable statutory limit					
	PROSPECT PARK, FINLEY								
	SUPPLEMENT, BLOCK 28, LOTS 11 AND 12, CASCADE COUNTY,								
	MONTANA Line from Schedule A/B: 1.1								
	1996 YAMAHA XVZ13A 100,000 miles Line from <i>Schedule A/B</i> : 3.3	· \$2,270.00		\$2,500.00	Mont. Code Ann. § 25-13-609(2)				
				100% of fair market value, up to	• •				

any applicable statutory limit

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Debtor 1	BLAKE THOMAS VETTER			Case number (if known)	19-61155
	description of the property and line on dule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim	Specific laws that allow exemption
REC DES END COF CLO DRE BED KITO POT DISI REF DISI MIC	ICH 200.00 ELINER 100.00 K 10.00 TABLES 10.00 FEE TABLE 5.00 ICK 2.00 ISSER 10.00 TOUR AND THE SER 10.00 THEN TABLE & CHAIRS 30.00 THE SE UTENSILS 20.00 RIGERATOR 100.00 THING TOUR AND THE SERVICE AND	\$587.00		\$587.00 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
DRY BAR PAT LAW TOO WAT	SHER 100.00 (FER 100.00 (BEQUE 15.00 (IO FURNISHINGS 25.00 (IN MOWER 15.00 (ID S 50.00 (ID FURNISHINGS 25.00 (\$505.00		\$505.00 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
STE REC CAS VCR DVD VIDE VIDE COM PRIF	TELEVISION 50.00 REO 20.00 CORDS 20.00 SETTE TAPES 5.00 10.00 PLAYER 10.00 PS 5.00 EO GAMING EQUIPMENT 200.00 EO GAMES 60.00 MPUTER 150.00 NTER 30.00 from Schedule A/B: 7.1	\$560.00		\$560.00 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
NICI	NA/CRYSTAL 50.00 K-KNACKS 50.00 from Schedule A/B: 8.1	\$100.00		\$100.00 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
CAN FISH EXE	F EQUIPMENT 20.00 IPING EQUIPMENT 20.00 IING EQUIPMENT 50.00 RCISE EQUIPMENT 20.00 from Schedule A/B: 9.1	\$110.00		\$110.00 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
	I'S WEARING APPAREL from Schedule A/B: 11.1	\$100.00		\$100.00 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
CAS Line	SH from Schedule A/B: 16.1	\$43.00	■	\$32.25 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-614

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De	btor 1 BLAKE THOMAS VETTER			Case number (if known)	19-61155
	Brief description of the property and line on Schedule A/B that lists this property	property portion you own		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
		Schedule A/B	Crie	eck only one box for each exemption.	
	CHECKING: MONTANA FEDERAL CREDIT UNION	\$7.15		\$5.36	Mont. Code Ann. § 25-13-614
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	SAVINGS: MONTANA FEDERAL CREDIT UNION	\$48.86		\$36.65	Mont. Code Ann. § 25-13-614
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	BUSINESS CHECKING: STOCKMAN BANK	\$233.64		\$175.23	Mont. Code Ann. § 25-13-614
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	PERSONAL CHECKING: STOCKMAN BANK OF MONTANA	\$651.66		\$488.75	Mont. Code Ann. § 25-13-614
	Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
	CHILD SUPPORT: \$380.00 PER MONTH	\$380.00		\$380.00	Mont. Code Ann. § 25-13-608(1)(g)
	Line from Schedule A/B: 29.1			100% of fair market value, up to any applicable statutory limit	
	TOOLS OF THE TRADE: LADDER 50.00	\$670.00		\$670.00	Mont. Code Ann. § 25-13-609(3)
	STEP LADDER 30.00 DRAIN SNAKE 40.00 CORDLESS DRILL 20.00 CORDLESS SAWZALL 20.00 POWER SAW 15.00 PLUMBINGTOOLS 50.00 ELECTRIC TOOLS 30.00 TOOLBOX 50.00 LAWN MOWER 15.00 CARPET SHAMPOOER 50.00 MISC. HAND TOOLS 300 Line from Schedule A/B: 40.1			100% of fair market value, up to any applicable statutory limit	20 10 000(0)
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 No			led on or after the date of adjustmen	t.)
	Yes. Did you acquire the property covere	d by the exemption wit	thin 1	,215 days before you filed this case?	,
	□ No □ Yes				

Fill in this information	on to identify you	r case:			
	BLAKE THOMAS				
	irst Name	Middle Name Last Name		-	
Debtor 2					
(Spouse if, filing) Fi	irst Name	Middle Name Last Name		-	
United States Bankrup	ptcy Court for the:	DISTRICT OF MONTANA		_	
	1155			— 0	w.u
(if known)				_	if this is an ded filing
Official Form 10 Schedule D:		Who Have Claims Secur	ed by Propert	:y	12/15
		f two married people are filing together, both are out, number the entries, and attach it to this form			
1. Do any creditors have	claims secured by	your property?			
☐ No. Check this	box and submit th	is form to the court with your other schedules	. You have nothing else	to report on this form.	
_	of the information b	•	J	•	
		ociow.			
<u> </u>	cured Claims		Column A	Column B	Column C
for each claim. If more th	han one creditor has	nore than one secured claim, list the creditor separa a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name.		Value of collateral that supports this	Unsecured portion
2.1 Mr. Cooper		Describe the property that secures the claim:	value of collateral. \$99.454.00	claim \$100,000.00	If any \$0.00
Creditor's Name		1601 5TH AVE. N. GREAT FALLS,	\$33,434.00	\$100,000.00	
Attn: Bankrup 8950 Cypress		MT 59401 CASCADE County			
Blvd	valers	As of the date you file, the claim is: Check all that	_		
Coppell, TX 7	5019	apply. Contingent			
Number, Street, City,	State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or	secured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor	=	Statutory lien (such as tax lien, mechanic's lien)		
At least one of the de		☐ Judgment lien from a lawsuit			
Check if this claim r	relates to a	Other (including a right to offset) Mortgag	e		
	Opened 08/12 Last				

0063

Last 4 digits of account number

Active

Date debt was incurred 5/06/19

Caco number (: Lineum)

10 61155

	TOWAS VETT		Case	number (ii known)	19-61133	
First Name	Middle N	lame Last Name				
2.2 Ocwen Loan S	Servicing	Describe the property that secures the	claim:	\$96,031.00	\$100,000.00	\$0.00
Creditor's Name Attn:	kruptov	601 5TH AVE. S. GREAT FALLS 59405 CASCADE County	S, MT			
Research/Ban 1661 Worthing Ste. 100 West Palm Be 33409	jton Rď,	As of the date you file, the claim is: Che apply. Contingent	ck all that			
Number, Street, City, S	•	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such as mor car loan)	tgage or secured			
☐ Debtor 1 and Debtor 2 ☐ At least one of the deb	,	☐ Statutory lien (such as tax lien, mechand ☐ Judgment lien from a lawsuit	nic's lien)			
☐ Check if this claim recommunity debt	elates to a		ortgage			
Date debt was incurred	Opened 01/06 Last Active 6/17/19	Last 4 digits of account number	4936			
Add the dollar value of	f vour entries in (Column A on this page. Write that number	here:	\$195,485	300	
	of your form, add	the dollar value totals from all pages.	nere.	\$195,485		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Dobtor 1 DI AVE THOMAS VETTED

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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							-	
Fill	in this info	ormation to identify your c	ase:					
Deb	otor 1	BLAKE THOMAS	/ETTER					
		First Name	Middle Name	Last Nam	е			
	otor 2	E N						
(Spoi	use if, filing)	First Name	Middle Name	Last Nam	e			
Unit	ted States I	Bankruptcy Court for the:	DISTRICT OF MON	TANA				
Cas	se number	19-61155						
(if kn		13-01133					☐ Check	if this is an
							amend	ed filing
Οίι	:-:-! =-	400E/E						
		rm 106E/F						40/45
		E/F: Creditors W						
Sche Sche left. /	edule G: Exe edule D: Cre Attach the C	ecutory Contracts and Unexpi ditors Who Have Claims Secu	red Leases (Official For ired by Property. If mor	m 106G). Do not incle e space is needed, co	ude any creo py the Part	ditors with partially s you need, fill it out,	ecured claims that a number the entries ir	re listed in the boxes on the
Par	t 1: List	All of Your PRIORITY Uns	secured Claims					
1.	Do any cred	ditors have priority unsecured	l claims against you?					
	☐ No. Go to	o Part 2.						
	Yes.							
	identify what possible, list	t type of claim it is. If a claim has	s both priority and nonpri r according to the credito	ority amounts, list that or r's name. If you have n	claim here a	nd show both priority a	nd nonpriority amount	s. As much as
	(For an expl	anation of each type of claim, se	ee the instructions for this	s form in the instruction	booklet.)			
						Total claim	•	
2.1	IRS		Last 4 digit	s of account number		\$12,045.00		\$0.00
	,	Creditor's Name OX 7346	When was	the debt incurred?	2016	_ · · · ·	· · · · ·	· · · · · · · · · · · · · · · · · · ·
		delphia, PA 19101-7346					•	
		r Street City State Zip Code	<u></u>	ate you file, the claim	is: Check a	II that apply		
	_		☐ Continge	ent				
	Debtor	1 only	☐ Unliquid	ated				
	☐ Debtor	2 only	☐ Disputed	t				
	☐ Debtor	1 and Debtor 2 only	Type of PR	IORITY unsecured cla	aim:			
	☐ At least	t one of the debtors and another	Domesti	c support obligations				
	☐ Check	if this claim is for a commun	ity debt Taxes a	nd certain other debts	you owe the	government		
	Is the clair	m subject to offset?	☐ Claims f	or death or personal in	jury while yo	u were intoxicated		12/15 List the other party to rm 106A/B) and on are listed in in the boxes on the pages, write your each claim listed, its. As much as inuation Page of Nonpriority amount
	■ No		Other. S				amended filing 12/15 In NONPRIORITY claims. List the other party to A/B: Property (Official Form 106A/B) and on tially secured claims that are listed in the tout, number the entries in the boxes on the name that the top of any additional pages, write your sparately for each claim. For each claim listed, iority and nonpriority amounts. As much as ured claims, fill out the Continuation Page of Priority amount Nonpriority amount 5.00 \$12,045.00 \$0.00	
	☐ Yes			2016				

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Debtor	BLAKE THOMAS VETTER		Case num	ber (if known)	19-61155		
2.2	Montana Department of Revenue	Last 4 digits of account number		\$5,200.00	\$5,200.0	0	\$0.00
	Priority Creditor's Name Attn: Bankruptcy Specialist PO Box 7701 Helena, MT 59604-7701	When was the debt incurred?	2016		-		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all th	at apply			
Wł	o incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:				
	At least one of the debtors and another	☐ Domestic support obligations					
	Check if this claim is for a community debt	Taxes and certain other debts	ou owe the gov	/ernment			
	he claim subject to offset?	☐ Claims for death or personal in	_				
	No	☐ Other. Specify					
	Yes	2016				_	
4. List	all of your nonpriority unsecured claims in the ecured claim, list the creditor separately for each clain one creditor holds a particular claim, list the other	alphabetical order of the creditor aim. For each claim listed, identify wi	who holds eac nat type of claim	n it is. Do not list cla	aims already include aims fill out the Cor	ed in Part 1. ntinuation Pa	If more
					10	otal claim	
4.1	Adrianna Medicine Horse Nonpriority Creditor's Name	Last 4 digits of account numb	er				\$0.00
	507 16th St. N. Great Falls, MT 59401	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check al	ll that apply			
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:				
	Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a s report as priority claims	eparation agree	ement or divorce th	at you did not		
	■ No	Debts to pension or profit-sh	aring plans, and	d other similar debt	S		
	Yes	Other. Specify NOTICE					

Debto	r1 BLAKE THOMAS VETTER	Case number (if known) 19-61155	
4.2	BENEFIS	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 500 15TH AVE. SO.	When was the debt incurred?	
	GREAT FALLS, MT 59405 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Services	
4.3	BENEFIS HEALTH SYS PHYS	Last 4 digits of account number 3557	\$490.80
	Nonpriority Creditor's Name C/O WELLS FARGO BANK PO BOX 912613	When was the debt incurred? 03/2019	
	DENVER, CO 80291-2613		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Services	
4.4	Benefis Health System-Hospitals	Last 4 digits of account number	Unknown
4.4	Nonpriority Creditor's Name	When was the debt incurred?	Olikilowii
	C/O WELLS FARGO PO BOX 912616	when was the dept incurred?	
	Denver, CO 80291-2616 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, and the graine, and the most an inal appropriate	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	

Nonpriority Creditor's Name 1101 26 TH SOUTH GREAT FALLS, MT 59405 As of the date you file, the claim is: Check all that apply	Debtor	BLAKE THOMAS VETTER	Case number (if known) 19-61155	
Norpriority Creditor's Name 1101 28TH SOUTH GREAT FALLS, MT 59405 Number Street City Stites & Pack Street City Stites & Pack	4.5	BENEFIS HEALTHCARE	Last 4 digits of account number	Unknown
As of the date you file, the claim is: Check all that apply		Nonpriority Creditor's Name 1101 26TH SOUTH		<u> </u>
Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 the claim subject to offset? No Debtor 1 and Debtor 2 only Debtor 5 the claim is for a community debt Street City State 2 pc Code Who incurred the debtor 5 Name Debtor 4 and Debtor 2 only Debtor 5 the claim subject to offset? No Debtor 5 the Calim is 6 or a community debt Street City State 2 pc Code Who incurred 1 bed bedor 2 only Debtor 5 the Calim is 5 or a community debt Street City State 2 pc Code Who incurred 1 bed bedor 2 only Debtor 5 configuration and nother incurred 2 pc 1 subject to offset? No Debtor 5 configuration and nother incurred 2 pc 1 subject to offset? No Debtor 5 configuration and nother incurred 2 pc 1 subject to offset? No Debtor 5 configuration and nother incurred 2 pc 1 subject 5 pc 1 s			As of the date you file, the claim is: Check all that apply	
Debtor 1 and Debtor 2 only		Who incurred the debt? Check one.		
Debtor 1 and Debtor 2 only		Debtor 1 only	☐ Contingent	
At least one of the debtors and another Check if this claim is for a community debt Student loans Check if this claim subject to offset? Check one. Check if this claim is for a community debt Student loans Check offset? Check one. Check offset? C		Debtor 2 only	☐ Unliquidated	
Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor 1 and Debtor 2 only	☐ Disputed	
Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Medical Services		☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services Other. Specify Medical Services Unknow. Nonpriority Creditor's Name 2519 13TH AVE SOUTH GREAT FALLS, MT 59405 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset? Nonpriority Creditor's Name Obelost of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nonpriority Creditor's Name Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services When was the debt incurred? Student loans Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services State 4 digits of account number As of the date you file, the claim is: Check all that apply Who incurred the debt of the debtors and another report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services State 4 digits of account number State City State 2 pc Code Who incurred the debt? Check one. Debts to pension or profit-sharing plans, and other similar debts When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 only Deb		☐ Check if this claim is for a community	☐ Student loans	
Yes				
4.6 BENEFIS HEALTHCARE PRAC Nonpriority Creditor's Name 2519 13TH AVE SOUTH GREAT FALLS, MT 59405 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor Specify No Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 2 only Nomer Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated Unknow When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated		■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Nonpriority Creditor's Name 2519 13TH AVE SOUTH GREAT FALLS, MT 59405 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 5 As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? Medical Services When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? Medical Services When was the debt incurred? State 4 digits of account number State City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated		Yes	■ Other. Specify Medical Services	
2519 13TH AVE SOUTH GREAT FALLS, MT 59405 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 6 this claim is for a community debt Is the claim subject to offset? No Debtor 9 who Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 who incurred the debtors and another Street City State Zip Code Who incurred the debtors and another Street City State Zip Code Who incurred the debtors and another Other. Specify Medical Services When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debtors and another Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated	4.6	BENEFIS HEALTHCARE PRAC	Last 4 digits of account number	Unknown
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 4 as priority claims Debtor 4 only Debtor 5 pecify Medical Services BENEFIS HOSPITALS Nonpriority Creditor's Name PO BOX 5096 GREAT FALLS, MT 59403-9993 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 2 only Debtor 2 only As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply		2519 13TH AVE SOUTH	When was the debt incurred?	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services BENEFIS HOSPITALS Nonpriority Creditor's Name PO BOX 5096 GREAT FALLS, MT 59403-9993 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated			As of the date you file, the claim is: Check all that apply	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify ■ Other. Specify ■ Medical Services 4.7 ■ BENEFIS HOSPITALS Nonpriority Creditor's Name PO BOX 5096 GREAT FALLS, MT 59403-9993 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify ■ Medical Services \$1,000.0		Who incurred the debt? Check one.		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify ■ Other. Specif		■ Debtor 1 only	☐ Contingent	
Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Check Specify Medical Services Last 4 digits of account number S1,000.0 When was the debt incurred? GREAT FALLS, MT 59403-9993 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Contingent Unliquidated		☐ Debtor 2 only	☐ Unliquidated	
Check if this claim is for a community debt Is the claim subject to offset? No Pes BENEFIS HOSPITALS Nonpriority Creditor's Name PO BOX 5096 GREAT FALLS, MT 59403-9993 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Medical Services Medical Services \$1,000.6 Medical Services \$1,000.6		☐ Debtor 1 and Debtor 2 only	☐ Disputed	
debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Yes Honoriority Creditor's Name PO BOX 5096 GREAT FALLS, MT 59403-9993 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Who incurred the debt of the claim is th		☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Is the claim subject to offset? In No		☐ Check if this claim is for a community	☐ Student loans	
□ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify Medical Services □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical Services □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical Services □ Standard Se				
A.7 BENEFIS HOSPITALS Nonpriority Creditor's Name PO BOX 5096 GREAT FALLS, MT 59403-9993 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Medical Services *\$1,000.0 *\$1,000.0 *\$1,000.0 *\$1,000.0 *\$1,000.0 *\$1,000.0 *\$1,000.0 *\$1,000.0 *\$1,000.0 *\$1,000.0		_	<u> </u>	
4.7 BENEFIS HOSPITALS Nonpriority Creditor's Name PO BOX 5096 GREAT FALLS, MT 59403-9993 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated				
Nonpriority Creditor's Name PO BOX 5096 GREAT FALLS, MT 59403-9993 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated		Yes	Other. Specify Medical Services	
PO BOX 5096 GREAT FALLS, MT 59403-9993 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Unliquidated When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent □ Unliquidated			Last 4 digits of account number	\$1,000.00
Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Unliquidated		PO BOX 5096	When was the debt incurred?	
■ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated		·	As of the date you file, the claim is: Check all that apply	
□ Debtor 2 only □ Unliquidated		_	_	
		_		
			Unliquidated	
,		☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community ☐ Student loans				
debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No □ Debts to pension or profit-sharing plans, and other similar debts		_		
☐ Yes ☐ Other. Specify Medical Services				

Debtor	1 BLAKE THOMAS VETTER		Case number (if known)	19-61155	
4.8	BENEFIS MEDICAL GROUP	Last 4 digits of account number			Unknown
	Nonpriority Creditor's Name PO BOX 6010 GREAT FALLS, MT 59406	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that	t you did not	
	Is the claim subject to offset?	report as priority claims	-		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify Medical Se	rvices		
4.9	Capital One Bank, USA N.A.	Last 4 digits of account number	7506		Unknown
	Nonpriority Creditor's Name General Correspondence Bankruptcy	When was the debt incurred?			
	PO Box 30285 Salt Lake City, UT 84130	_			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that	t you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	☐ Yes	NOTICE OF Capital On Bank	NLY e/Cabela's/World's Fore	most	
	163	— Other. Speeding Bank			
4.1	Cenlar Mortgage Nonpriority Creditor's Name	Last 4 digits of account number	5914		Unknown
	Central Loan Administration Attn: Bankruptcy 425 Phillips Blvd	When was the debt incurred?	Opened 12/28/06 Last 1/07/16	t Active	
	Ewing, NJ 08618 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	_	Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that	t vou did not	
	Is the claim subject to offset?	report as priority claims	a.aon agroomone or arvorce trial	. , 54 414 1101	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts		
	☐ Yes	■ Other Specify NOTICE OF	NLY		

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1 BLAKE THOMAS VETTER		Case number (if known)	19-61155	
Chase Card Services	Last 4 digits of account number	5145		\$8,282.00
Nonpriority Creditor's Name Attn: Bankruptcy PO Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 03/06 Las 06/19	t Active	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	e that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar d	ebts	
Yes	Other. Specify Credit Card	<u> </u>		
Chase Card Services	Last 4 digits of account number	4179		\$2,675.00
Nonpriority Creditor's Name Attn: Bankruptcy PO Box 15298	When was the debt incurred?	Opened 09/03 Las 06/19	t Active	
Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce	e that you did not	
No	report as priority claims Debts to pension or profit-sharing	a plane, and other similar d	ahta	
■ No □ Yes	Other. Specify Credit Card	•	ents	
	. ,			
Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	1335		\$4,207.00
Attn: Recovery Centralized Bankruptcy PO Box 790034	When was the debt incurred?	Opened 03/03 Las 06/19	t Active	
St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
■ Debtor 1 only	☐ Contingent			
□ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce	e that you did not	
Is the claim subject to offset?	report as priority claims		,	
■ No	Debts to pension or profit-sharing	g plans, and other similar d	ebts	
□Yes	■ Other. Specify Charge Acc	count		

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Debto	or 1 BLAKE THOMAS VETTER		Case number (if known)	19-61155	
4.1	City of Great Falls Fiscal Services	Last 4 digits of account number			Unknown
4	Nonpriority Creditor's Name 2 Park Drive South Room 104	When was the debt incurred?			
	Great Falls, MT 59403 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divo	orce that you did not	
	No	Debts to pension or profit-sharir	na plane, and other simila	ur dehte	
	☐ Yes	Other. Specify Utility Serv			
4.1	Comenity Bank/Victoria Secret	Last 4 digits of account number	6513		\$772.00
5	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 182125	When was the debt incurred?	Opened 04/00 L 6/11/19	ast Active	
	Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divo	orce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other simila	r debts	
	☐ Yes	Other. Specify Charge Acc	count		
4.1 6	Darcy May	Last 4 digits of account number		_	\$0.00
	Nonpriority Creditor's Name 413 6th St. S. Great Falls, MT 59401	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divo	orce that you did not	
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing	• •	r debts	
	Yes	■ Other. Specify NOTICE ON	NLY		

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Debt	or 1 BLAKE THOMAS VETTER		Case number (if known) 19-61155	
4.1 7	Discover Financial	Last 4 digits of account number	3130	\$5,927.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 15316 Wilmington, DE 10850	When was the debt incurred?	Opened 02/00 Last Active 6/04/19	
	Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1 8	ENERGY WEST	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name PO BOX 2229 GREAT FALLS, MT 59403-2229	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Utility Serv	ices	
4.1 9	Eric Crook Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	1601 5th Ave. N. Great Falls, MT 59401	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharing		
	☐ Yes	■ Other Specify NOTICE ON	ILY	

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BLAKE THOMAS VETTER	Case number (if known) 19-61155	
lan Delorio	Last 4 digits of account number	\$(
Nonpriority Creditor's Name 505 16th St. N. Great Falls, MT 59401	When was the debt incurred?	<u> </u>
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify NOTICE ONLY	
Jason Grundhauser	Last 4 digits of account number	\$
Nonpriority Creditor's Name 601 5th Ave. S., #1	When was the debt incurred?	
Great Falls, MT 59401 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify NOTICE ONLY	
JESUSA VETTER	Last 4 digits of account number	\$5,00
Nonpriority Creditor's Name 1704 19TH AVE. S. GREAT FALLS. MT 59405	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	

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Case number (if known) 19-61155	
Local Adigita of account number	\$0.00
Last 4 digits of account number	ψ0.00
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not	
report as priority claims	
\square Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify NOTICE ONLY	
	\$0.00
Last 4 digits of account number	Ψ0.00
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not	
report as priority claims	
☐ Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify NOTICE ONLY	
	\$0.00
Last 4 digits of account number	φυ.υυ
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not	
report as priority claims	
☐ Debts to pension or profit-sharing plans, and other similar debts	
	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts NOTICE ONLY Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify NOTICE ONLY Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims or the date you file, the claim is: Check all that apply

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BLAKE THOMAS VETTER		Case number (if known) 19-61155	
Montana Federal Credit	Last 4 digits of account number	6801	\$4,819.00
Nonpriority Creditor's Name		Opened 01/15 Last Active	
901 8th Ave. S. Great Falls, MT 59403	When was the debt incurred?	6/25/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	<u> </u>	
NORTHWESTERN ENERGY	Last 4 digits of account number		Unknowi
Nonpriority Creditor's Name 40 EAST BROADWAY ST	When was the debt incurred?		
BUTTE, MT 59701	When was the dest incurred:		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Vho incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
ebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Utility Serv	ices	
Ocwen Loan Servicing, LLC	Last 4 digits of account number	2017	\$85,130.00
Nonpriority Creditor's Name 1661 Worthington Road Suite 100	When was the debt incurred?	Opened 03/04 Last Active	
West Palm Beach, FL 33409 Number Street City State Zip Code	As of the date you file, the claim		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	FORECLOS Other. Specify Real Estate	SURE IN 2016	
— :	r INGAI ESIAI	, mortgage	

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BLAKE THOMAS VETTER	Case number (if known) 19-61155	
Republic Services	Last 4 digits of account number	Unknow
Nonpriority Creditor's Name	When was the debt incurred?	
Great Falls, MT 59401 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Garbage Collection Services	
Republic Services	Last 4 digits of account number	Unknow
Nonpriority Creditor's Name 3201 15th St.	When was the debt incurred?	
Black Eagle, MT 59414 Jumber Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Поли	
	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Garbage Collection Services	
Robert Lake	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name	When was the debt incurred?	
Great Falls, MT 59401	As of the data was file the plaint in Obselvell that such	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
□ Check it this claim is for a community lebt sthe claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify NOTICE ONLY	

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Debtor	1 BLAKE T	HOMAS VETTER		Case no	umber (if known)	19-61155	
4.3	Stephanie I	Deshaw	Last 4 digits of account number				\$0.00
	Nonpriority Cree 503 16th St	. N.	When was the debt incurred?				-
-		, MT 59401 City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check	k all that apply		
	■ Debtor 1 on	lv	☐ Contingent				
	Debtor 2 on	•	☐ Unliquidated				
		•	'				
	Debtor 1 an	,	☐ Disputed Type of NONPRIORITY unsecure	d alaimı			
	_	of the debtors and another	Student loans	u ciaim:			
	☐ Check if thi	is claim is for a community	_				
		bject to offset?	☐ Obligations arising out of a separe port as priority claims	aration ag	greement or divorce	that you did not	
	■ No	bject to onset.	☐ Debts to pension or profit-sharin	na nlans	and other similar de	ahts	
	☐ Yes		Other. Specify NOTICE OI		and other similar de		-
4.3	World's Fo	remost Bank		7506			¢5 077 00
3	Nonpriority Cre		Last 4 digits of account number	7500	<u> </u>		\$5,977.00
	Attn: Bankr 4800 NW 1s	ruptcy	When was the debt incurred?	Oper 06/19	ned 05/02 Las	t Active	
-	Lincoln, NE						
		City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check	call that apply		
	■ Debtor 1 on	lv	☐ Contingent				
	Debtor 2 on	•	☐ Unliquidated				
	Debtor 1 an	•	<u> </u>				
	_	•	☐ Disputed Type of NONPRIORITY unsecure				
		of the debtors and another	Student loans	u ciaiiii.			
	☐ Check if thi	is claim is for a community	_			de la Prima	
		bject to offset?	☐ Obligations arising out of a separeport as priority claims	aration ag	greement or divorce	that you did not	
	No		Debts to pension or profit-sharing	ng plans,	and other similar de	ebts	
	Yes		■ Other. Specify Credit Card	t			_
	is page only if		out your bankruptcy, for a debt that y				
have n	nore than one o		neone else, list the original creditor in you listed in Parts 1 or 2, list the add submit this page.				
Part 4:	Add the A	mounts for Each Type of Un	secured Claim				
	the amounts of f unsecured cla		ns. This information is for statistical r	eporting	purposes only. 28	3 U.S.C. §159. Ad	d the amounts for each
					Total	Claim	
Total	6a.	Domestic support obligations		6a.	\$	0.00	-
claims from Pa	r t 1 6b.	Taxes and certain other debts	you owe the government	6b.	\$	17,245.00	
	6c.		njury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unse	ecured claims. Write that amount here.	6d.	\$	0.00	_
	6e.	Total Priority. Add lines 6a thro	ugh 6d.	6e.	\$	17,245.00	-
						Ola im	
Total	6f.	Student loans		6f.	*	0.00	-
claims from Pa	rt 2 6g.	Obligations arising out of a se	paration agreement or divorce that claims	6g.	\$	0.00	_

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Debtor 1	BLAKE T	HOMAS VETTER	Case number (if known)		19-61155	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	124,279.80	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	124,279.80	

Fill in this infor	mation to identify your	case:		
Debtor 1	BLAKE THOMAS	VETTER		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF MONTANA		
Case number	19-61155			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Adrianna Medicine Horse 507 16th St. N. Great Falls, MT 59401	Rental Lease
2.2	Darcy May 413 6th St. S. Great Falls, MT 59401	Rental Lease
2.3	Eric Crook 1601 5th Ave. N. Great Falls, MT 59401	Rental Lease
2.4	lan Delorio 505 16th St. N. Great Falls, MT 59401	Rental Lease
2.5	Jason Grundhauser 601 5th Ave. S., #1 Great Falls, MT 59401	Rental Lease
2.6	Kelly Untersche 601 5th Ave. S., #3 Great Falls, MT 59401	Rental Lease
2.7	Michael Howard 601 5th Ave. S., #6 Great Falls, MT 59401	Rental Lease
2.8	Michael Roe 413 6th St. S. Great Falls, MT 59401	Rental Lease

Debtor 1 BLAKE THOMAS VETTER Case number (if known) 19-61155

Additional Page if You Have More Contracts or Leases

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.9	Robert Lake 503 16th St. N. Great Falls, MT 59401	Rental Lease
2.10	Stephanie Deshaw 503 16th St. N. Great Falls, MT 59401	Rental Lease

Official Form 106G

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Fill in this	information to identify your	case:			
Debtor 1	BLAKE THOMAS		Leaf News		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	DISTRICT OF MONTAI	NA		
Case numb	ber 19-61155				☐ Check if this is an amended filing
Sched Codebtors		re also liable for any deb			12/15 ate as possible. If two married eeded, copy the Additional Page,
our name	and case number (if known)	. Answer every question			o of any Additional Pages, write
1. Do <u>y</u>	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Yes	;				
Arizon No.	hin the last 8 years, have you a, California, Idaho, Louisiana. Go to line 3. b. Did your spouse, former spouse.	Nevada, New Mexico, Pu	erto Rico, Texas, Wash		y states and territories include
in line Form	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Officia Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D. line	e
	Name			□ Schedule E/F, I □ Schedule G, lin	ine
	Number Street City	State	ZIP Code	_	
3.2	Name			_ ☐ Schedule D, lin ☐ Schedule E/F, I ☐ Schedule G, lin	ine
-	Number Street			_	
	City	State	ZIP Code		

Fill	in this information to identify your o	case:						
De	btor 1 BLAKE THO	OMAS VETTER			_			
	btor 2 buse, if filing)							
Un	ited States Bankruptcy Court for the	e: DISTRICT OF MONT	ANA					
Ca	se number 19-61155					Check if this is		
(If k	nown)		_			☐ An amende	ed filing	
								ng postpetition chapter following date:
0	fficial Form 106I					MM / DD/ Y	YYYY	
S	chedule I: Your Inc	ome						12/15
spo	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ur spouse is not filing w On the top of any additi	ith you, do not inclu	de infor	matio	on about your sp	ouse. If m	ore space is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-f	iling spouse
	If you have more than one job,	Employment status	■ Employed			☐ Empl	oyed	
	attach a separate page with information about additional		☐ Not employed			☐ Not e	mployed	
	employers.	Occupation	DELIVERY DRIV	'ER				
	Include part-time, seasonal, or self-employed work.	Employer's name	DOMINO'S PIZZ	Α				
	Occupation may include student or homemaker, if it applies.	Employer's address	4109 2ND AVE. GREAT FALLS,		105			
		How long employed t	here? 2 MON	ГНЅ				
Pa	rt 2: Give Details About Mo	nthly Income						
	mate monthly income as of the cuse unless you are separated.		you have nothing to re	eport for	any l	ine, write \$0 in the	space. In	clude your non-filing
	ou or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for that perso	on on the I	ines below. If you need
						For Debtor 1		ebtor 2 or ling spouse
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,600.00	\$	N/A
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A

Official Form 106I Schedule I: Your Income page 1

2,600.00

\$

N/A

4. Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	BLAKE THOMAS VETTER	-	Ca	ase number (if kn	own)	19-611	55	
	_			F	For Debtor 1		non-fili	btor 2 or ing spouse	
	Cop	y line 4 here	4.	\$	2,600	.00	\$	N/	<u>A</u>
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	539	.69	\$	N/	A
	5b.	Mandatory contributions for retirement plans	5b.			.00	\$	N/	
	5c.	Voluntary contributions for retirement plans	5c.			.00	\$	N/	
	5d.	Required repayments of retirement fund loans	5d.			.00	\$	N/	
	5e.	Insurance	5e.			.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$.00	\$	N/A	
	5g.	Union dues	5g.			.00		N/A	
	5h.	Other deductions. Specify:	5h.	+ \$			+ \$	N/	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	539		\$	N/	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,060	.31	\$	N/	<u>A</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-	•			•		
	Oh	monthly net income.	8a.			.00	\$	N/A	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive	8b.	4	·	.00	Φ	N/	<u>A</u>
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	9	380	00	\$	N/	٨
	8d.	Unemployment compensation	8d.			.00	\$	N/A	
	8e.	Social Security	8e.			.00	\$	N/	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$.00	\$	N//	
	8g.	Pension or retirement income	8g.			.00	\$	N/	
	8h.	Other monthly income. Specify:	8h.	+ \$	50	.00	+ \$	N/	<u>A</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	380	.00	\$	N	/A
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	2,440.31	+ \$	ı	N/A = \$	2.440.31
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_		' -			_,
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe		.,		,	edule J. 11. +\$ _	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						12. \$	2,440.31
								Comb	oined hly income
13.	Do y	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?					mont	y moonie

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify ye	our case:			Ī		
	tor 1	BLAKE THO		TED		Chr	eck if this is:	
Deb	ioi i	BLAKE INC	IVIAS VE	IIEK			An amended filing	l
	tor 2 ouse, if filing)							wing postpetition chapter f the following date:
` '			DISTRI				MM / DD / YYYY	
Unit	ed States Bankr	uptcy Court for the	E DISTRI	CT OF MONTANA			MIM / DD / YYYY	
1	e number 19 nown))-61155						
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	nses				12/15
info	ormation. If m		eded, atta	. If two married people a ich another sheet to this n.				
Par		ibe Your House	ehold					
1.	Is this a joir							
	■ No. Go to		in a conor	ate household?				
	□ Yes. Doe		ın a separ	ate nousenoid?				
	= ::	~	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	btor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			SON		14	Yes
								□ No □ Yes
							_	□ No
								☐ Yes
								□ No
	_							☐ Yes
3.	expenses of	enses include f people other t d your depende	:han _	No Yes				
Par		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				apter 13 case to report of the form and fill in the
Incl	lude expense	s paid for with	non-cash	government assistance	if you know			
	value of sucl ficial Form 10		d have ind	cluded it on Schedule I:	Your Income		Your exp	penses
(·,						
4.		or home owners and any rent for th		ses for your residence. I or lot.	Include first mortgag	e 4.	\$	0.00
	If not includ	led in line 4:						
	4a. Real e	state taxes				4a.	\$	50.00
		rty, homeowner'				4b.	·	0.00
			•	ıpkeep expenses		4c.	·	75.00
5.		owner's associa nortgage paym		dominium dues our residence, such as ho	nme equity loans	4d. 5.	·	0.00 0.00
J.	Auditional	norigage payiii	citto for ye	our residence, such as HC	and equity lualis	J.	Ψ	0.00

ebtor 1	BLAKE THOMAS VETTER	Case number (if know	n) 19-61155
Utilit	ties:		
6a.	Electricity, heat, natural gas	6a. \$	90.00
6b.	Water, sewer, garbage collection	6b. \$	92.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	85.00
6d.	Other. Specify:	6d. \$	0.00
Food	d and housekeeping supplies	7. \$	600.00
	dcare and children's education costs	8. \$	0.00
Clot	hing, laundry, and dry cleaning	9. \$	175.00
	conal care products and services	10. \$	90.00
. Med	ical and dental expenses	11. \$	60.00
. Tran	sportation. Include gas, maintenance, bus or train fare.	· 	
	ot include car payments.	12. \$	450.00
3. Ente	ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	90.00
. Cha	ritable contributions and religious donations	14. \$	15.00
. Insu	rance.		
	ot include insurance deducted from your pay or included in lines 4 or 20.		
	Life insurance	15a. \$	0.00
15b.	Health insurance	15b. \$	0.00
15c.	Vehicle insurance	15c. \$	25.00
15d.	Other insurance. Specify:	15d. \$	0.00
. Taxe	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Spec	sify: VEHICLE TAGS	16. \$	50.00
	allment or lease payments:		
17a.	Car payments for Vehicle 1	17a. \$	0.00
	Car payments for Vehicle 2	17b. \$	0.00
17c.	Other. Specify: IRS	17c. \$	200.00
17d.	Other. Specify:	17d. \$	0.00
	r payments of alimony, maintenance, and support that you did not repor		2.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 10		0.00
	er payments you make to support others who do not live with you.	\$	380.00
	EX-WIFE PROPERTY SETTLEMENT	19.	
	er real property expenses not included in lines 4 or 5 of this form or on 5		
	Mortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	0.00
	Property, homeowner's, or renter's insurance	20c. \$	0.00
	Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e.	Homeowner's association or condominium dues	20e. \$	0.00
. Othe	er: Specify:	21. +\$	0.00
Colo	ulate very mentility evinence		
	culate your monthly expenses Add lines 4 through 21.	\$	2 527 00
	•		2,527.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106.		
22c.	Add line 22a and 22b. The result is your monthly expenses.	\$	2,527.00
. Calc	ulate your monthly net income.		
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2,440.31
	Copy your monthly expenses from line 22c above.	23b\$	2,527.00
_00.	SSP) 154. Morning expended from the 220 above.	Σου. Ψ	2,321.00
230	Subtract your monthly expenses from your monthly income.		
_00.	The result is your <i>monthly net income</i> .	23c. \$	-86.69
For e	rou expect an increase or decrease in your expenses within the year after xample, do you expect to finish paying for your car loan within the year or do you expect fication to the terms of your mortgage?		increase or decrease because of
■ N	0.		
	es. Explain here:		

Fill in this info	ormation to identify your	case:		
Debtor 1	BLAKE THOMAS	VETTER		
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	DISTRICT OF MONTANA		_
Case number	19-61155			
(if known)				☐ Check if this is an
				amended filing
O(f) : 1 E	4000			
Official Fo	rm 106Dec			
Declara	tion About a	n Individual De	ebtor's Schedule	S 12/15
If two married	people are filing togethe	r, both are equally responsible	e for supplying correct information	on.
				se statement, concealing property, or \$250,000, or imprisonment for up to 20
	18 U.S.C. §§ 152, 1341, 1		ty case can result in fines up to s	5250,000, or imprisonment for up to 20
, c	33 102, 1011,			
Si	gn Below			
Did you p	oay or agree to pay some	one who is NOT an attorney to	help you fill out bankruptcy for	ms?
■ No				
□ Yes.	Name of person		Atta	ch Bankruptcy Petition Preparer's Notice.
				laration, and Signature (Official Form 119)
	naity of perjury, I declare are true and correct.	that I have read the summary	and schedules filed with this de	claration and
that they a	are true and correct.			
X /s/ BI	AKE THOMAS VETTE	₽R	X	
	KE THOMAS VETTER		Signature of Debtor 2	
Signat	ture of Debtor 1			
Date	November 18, 2019		Date	
Date	14076111061 10, 2019		Date	

Fil	l in this infor	mation to identify you	r case:			
De	btor 1	BLAKE THOMAS	S VETTER			
_		First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	ankruptcy Court for the:	DISTRICT OF MONTANA	A		
Ca	se number	19-61155				
(if k	nown)				_	heck if this is an mended filing
○ :	fficial Fo	rm 107				
	fficial Fo		Affairs for Individ	duals Filing for B	ankruptcy	4/19
Be info	as complete or as com	and accurate as possi	ble. If two married people a	re filing together, both are	equally responsible for supp additional pages, write you	
		, , , , ,	ธนอก. arital Status and Where You	Lived Before		
1.		ır current marital statu		Elited Belole		
	_					
	■ Married■ Not ma	-				
2.	During the I	last 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
	■ No					
	_	ake sure you fill out Sch	nedule H: Your Codebtors (Of	ficial Form 106H).		
Б-	-(0 - F	to the Occurred of Version				
Pa	rt 2 Expla	in the Sources of You	r income			
4.	Fill in the tot	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		dar years?
	□ No					
		II in the details.				
			Dobtos 4		Dobtor 2	
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,800.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 1 BLAKE THOMAS VETTER

Case number (if known) 19-61155

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
	Operating a business		☐ Operating a business	
For last calendar year: (January 1 to December 31, 2018)	☐ Wages, commissions, bonuses, tips	\$45,900.00	☐ Wages, commissions, bonuses, tips	
	Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2017)	☐ Wages, commissions, bonuses, tips	\$51,000.00	☐ Wages, commissions, bonuses, tips	
	■ Operating a business		☐ Operating a business	
 Did you receive any other income Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cas List each source and the gross inco No Yes. Fill in the details. 	per that income is taxable. Exappensions; rental income; interse and you have income that your from each source separate	imples of other income are all est; dividends; money collect ou received together, list it or	ed from lawsuits, royalties; an nly once under Debtor 1. nat you listed in line 4.	
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Child Support	\$4,180.00		
For last calendar year: (January 1 to December 31, 2018)	Child Support	\$4,560.00		
For the calendar year before that: (January 1 to December 31, 2017)	Child Support	\$4,560.00		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 **BLAKE THOMAS VETTER** Case number (if known) 19-61155 Debtor 1 or Debtor 2 or both have primarily consumer debts. Yes. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe paid Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the Describe the Property Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 3

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19-61155-BPH Doc#: 15 Filed: 11/18/19 Entered: 11/18/19 10:51:08 Page 42 of 53 Debtor 1 BLAKE THOMAS VETTER Case number (if known) 19-61155 Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? ☐ No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. DAMAGES TO RENTAL UNITS 2019 \$5.000.00 Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You KAZDA LAW FIRM, P.C. **ATTORNEY FEE'S** 08/02/2019 \$2,125.00 **600 CENTRAL AVENUE STE 316 GREAT FALLS, MT 59401** kkazda@kazdalawfirm.com

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Amount of Date payment **Address** transferred or transfer was payment made

Official Form 107

Debtor 1 BLAKE THOMAS VETTER

Case number (if known) 19-61155

18.	Within 2 years before you filed transferred in the ordinary coulnclude both outright transfers an include gifts and transfers that you No Yes. Fill in the details.	urse of your bus	siness or financial affa e as security (such as	airs? the granting of a	•		
	Person Who Received Transf Address	er	Description and various transfer		paym	ribe any property or lents received or debts in exchange	Date transfer was made
	Person's relationship to you						
19.	Within 10 years before you file beneficiary? (These are often on the No Yes. Fill in the details.			ny property to a	a self-settle	ed trust or similar device o	f which you are a
	Name of trust		Description and	alue of the pro	perty tran	sferred	Date Transfer was
							made
Par	rt 8: List of Certain Financial	Accounts, Instr	uments, Safe Deposi	t Boxes, and S	torage Uni	ts	
20.	Within 1 year before you filed	for bankruptcy.	were any financial ac	counts or inst	ruments he	eld in vour name. or for vo	ur benefit. closed.
_0.	sold, moved, or transferred? Include checking, savings, mo	oney market, or	other financial accou	nts; certificate:	s of depos		
	■ No	,, a.,, a.,	and only in a	iolai illoutatioi	.0.		
	☐ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State Code)		ast 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you he cash, or other valuables?	nave within 1 ye	ar before you filed for	^r bankruptcy, a	ny safe de	posit box or other deposit	cory for securities,
	☐ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State	and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a	storage unit or	place other than you	home within 1	l year befo	re you filed for bankruptc	y?
	No Tuesday						
	Yes. Fill in the details.		Who also has an		Dagarika	the contents	De ven etill
	Name of Storage Facility Address (Number, Street, City, State	e and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Par	rt 9: Identify Property You Ho	old or Control fo	or Someone Else				
23.				ude any prope	rty you bor	rowed from, are storing fo	or, or hold in trust
	■ No						
	☐ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State	and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	rt 10: Give Details About Envi	ronmental Infor	mation				
	the purpose of Part 10, the follo						
	Environmental law means any	federal, state, o	or local statute or reg	ulation concer	ning pollut	ion, contamination, releas	es of hazardous or

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

Debtor 1 BLAKE THOMAS VETTER

Case number (if known) 19-61155

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							
Rep	ort a	III notices, releases, and proceedings th	at you know about, regardless of when	the	y occurred.			
24.	Has	any governmental unit notified you tha	t you may be liable or potentially liable	und	er or in violation of an environm	ental law?		
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice		
25.	Hav	re you notified any governmental unit of	any release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Hav	e you been a party in any judicial or adr	ministrative proceeding under any envir	ronn	nental law? Include settlements	and orders.		
		No						
		Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case		
Par	rt 11:	Give Details About Your Business or	Connections to Any Business					
27.	Wit	hin 4 years before you filed for bankrup	tcy, did you own a business or have any	y of	the following connections to an	y business?		
		■ A sole proprietor or self-employed i	in a trade, profession, or other activity,	eith	er full-time or part-time			
		☐ A member of a limited liability comp	pany (LLC) or limited liability partnershi	p (L	LP)			
		☐ A partner in a partnership						
		☐ An officer, director, or managing executive of a corporation						
		☐ An owner of at least 5% of the voting or equity securities of a corporation						
		No. None of the above applies. Go to l	Part 12.					
		Yes. Check all that apply above and fill	I in the details below for each business.					
	Bu	siness Name	Describe the nature of the business		Employer Identification number			
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security Dates business existed	number or ITIN.		
		AND J ENTERPRISES	RENTALS		EIN:			
		1 5TH AVE. S., #5 REAT FALLS, MT 59401	DOUGLAS WILSON & COMPANY,	,	From-To 2000 TO PRESEN	т		

DOUGLAS WILSON & COMPANY,

CONTRACTOR

P.C.

EIN:

From-To __/___ TO __/___

QUALITY ENTERPRISE

GREAT FALLS, MT 59405

1925 24TH AVE. S.

Debtor 1 BLAKE THOMAS VETTER Case number (if known) 19-61155 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ BLAKE THOMAS VETTER Signature of Debtor 2 **BLAKE THOMAS VETTER** Signature of Debtor 1 Date November 18, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	ill in this information to identify your case:				
Debtor 1	BLAKE THOMAS	VETTER			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MONTANA			
_	19-61155				
(if known)				☐ Check if this is an amended filing	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Mr. Cooper	_	_
Собра	Surrender the property.	■ No
name:	Retain the property and redeem it.	_
Description of 1601 5TH AVE. N. GREAT	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property FALLS, MT 59401 CASCADE securing debt: County	☐ Retain the property and [explain]:	
Creditor's Ocwen Loan Servicing	■ Surrender the property.	■ No
name:	Retain the property and redeem it.	
Description of 601 5TH AVE. S. GREAT FALLS,	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property MT 59405 CASCADE County securing debt:	☐ Retain the property and [explain]:	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	BLAKE THOMAS VETTER	Case number (if known)	19-61155
Lessor's n Descriptio Property:	ame: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	ame: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	ame: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	n of leased		□ No □ Yes
Lessor's n Descriptio Property:	ame: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	ame: n of leased		□ No □ Yes
Property:	ame: n of leased Sign Below		□ No □ Yes
Under pen	nalty of perjury, I declare that I have indicated my intention a hat is subject to an unexpired lease.		cures a debt and any personal
BLA	BLAKE THOMAS VETTER KE THOMAS VETTER ature of Debtor 1	Signature of Debtor 2	
Date	November 18, 2019	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 19-61155-BPH Doc#: 15 Filed: 11/18/19 Entered: 11/18/19 10:51:08 Page 52 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Montana

In re	BLAKE THOMAS VETTER		Case No.	19-61155
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSA	ATION OF ATTO	RNEY FOR DE	CBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept			2,125.00
	Prior to the filing of this statement I have received		\$	2,125.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compensation	ntion with any other person	unless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of			
5.	In return for the above-disclosed fee, I have agreed to render	r legal service for all aspec	ts of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statement c. Representation of the debtor at the meeting of creditors at d. [Other provisions as needed] Negotiations with secured creditors to reduce reaffirmation agreements and applications at 	nt of affairs and plan which nd confirmation hearing, a nce to market value; ex as needed; preparation	h may be required; nd any adjourned hear emption planning;	rings thereof;
	522(f)(2)(A) for avoidance of liens on house	hold goods.		
б.	By agreement with the debtor(s), the above-disclosed fee doc Representation of the debtors in any discha any other adversary proceeding.			es, relief from stay actions or
	C	ERTIFICATION		
	I certify that the foregoing is a complete statement of any agrankruptcy proceeding.	reement or arrangement fo	r payment to me for re	epresentation of the debtor(s) in
N	lovember 18, 2019	/s/ KRAIG C. KA		
I	Oate (KRAIG C. KAZDA Signature of Attorn KAZDA LAW FIR 600 CENTRAL A SUITE 316 Great Falls, MT 5 406-727-2884 Fa	ey M, P.C. VENUE 59401 ax: 406-452-0285	
		kkazda@kazdala Name of law firm	iwiirm.com	

United States Bankruptcy Court District of Montana

In re	BLAKE THOMAS VETTER	Debtor(s)	Case No. Chapter	19-61155 7	
	VERIFICATION OF CREDITOR MATRIX				
The abo	ove-named Debtor hereby verifies that the	he attached list of creditors is true and o	correct to the best	of his/her knowledge.	
Date:	November 18, 2019	/s/ BLAKE THOMAS VETTER			

Signature of Debtor